



City of Bel Aire
7651 E Central Park Avenue
Bel Aire, KS 67216

Phone: (316) 744-2451
Fax: (316) 744-3739

Street Tree Planting Program Application

Date: _____ Telephone: _____

Owner: _____

Address: _____

Number of Trees: 1 or 2 Type of Tree(s): _____
See Attached "Preferred Tree Species for Bel Aire, KS"

Please Attach a Drawing that Includes all the following

Please mark the location of the following:

- Buildings
- Proposed Tree Location
- Sidewalks

Indicate the distance, in feet, from:

- Curb to Tree
- House to Tree
- Tree to Tree
- Property Line to Tree

Proposed Cost per Tree: \$ _____

- Trees must be shade trees and not ornamental trees
- Half of the cost (up to \$25) may be reimbursed to the property owner
- Only completed applications, including drawing, will be considered
- A copy of the receipt must be submitted to the City Clerk after the purchase of tree(s)
- Trees must be placed 3 ft. to 8 ft. from curbs
- Minimum height must be 6 ft. to 8 ft. when tree(s) is planted

I understand that I am responsible for maintenance of this tree(s)

Signature: _____ Date: _____

Approved / Disapproved

Date: _____



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Tree Board Member	City Administrator
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